

## CERCLA REMOVAL ACTION DAILY WORK ORDER

## DAILY WORK ORDER

RESPONSE LOCATION (SITE NAME  
AND/OR ADDRESS AND ZIP CODE)

CONTRACT NO.

ORDER NO.

DATE

SHIFT

SITE/SPILL NO.

EPA REGION/USDG DIST

ON-SCENE COORDINATOR

CONTRACTOR

CONTRACTOR RESPONSE MANAGER

1.

MONITOR(S)

2.

DESCRIPTION OF WORK TO BE PERFORMED

NUMBER OF PERSONNEL AUTHORIZED

.....1..SUPERVISORS

.....1..FOREMAN

.....1..OPERATORS

.....4..LABORERS

.....2..OTHER (SPECIFY). P.C.T. Chemist.....

4.

EQUIPMENT AND EXPENDABLE MATERIALS AUTHORIZED

ITEM	QUANTITY	ITEM	QUANTITY
rental car 4x4	1	2. CN monitor	1 ea
van	1	labeled	1
computer	3	manifold	1
printer	2	radio	6
truck 1 ton	1		
fax, copier	1 ea		
air compressor	1		

I CERTIFY THAT THE ABOVE WORK IS ORDERED AND  
AUTHORIZED BY THE CONTRACTOR IN THE PER-  
FORMANCE OF THE ABOVE CITED DELIVERY ORDER.

I ACKNOWLEDGE RECEIPT OF THIS WORK ORDER.

SIGNATURE OF OSC

SIGNATURE OF CONTRACTOR'S REPRESENTATIVE

AMENDMENTS (INCLUDE TIME AND AUTHORIZING PERSON)

SIGNATURE OF OSC

SIGNATURE OF CONTRACTOR'S REPRESENTATIVE

ORIGINAL

442500

